



**Enter & View Visit Report**

**St Matthews Unit**

**29/31 St Matthews Parade, Northampton, NN2 7F**

**26 June 2014**

## Contents

About Healthwatch Northamptonshire .....	3
Enter & View .....	3
Key Benefits of Enter & View .....	5
Details of the Visit.....	5
Purpose of the visit.....	6
How the visit was conducted.....	6
Observations and findings .....	6
General impressions of the home.....	6
Personal care and dignity of resident .....	7
Independence of residents and control over daily life .....	7
Staff behaviour and attitudes and relationship between residents and staff .....	7
Activities for residents .....	8
Food and drink and meal times .....	8
Relationship between the home and residents/relatives .....	8
Staff satisfaction .....	9
Recommendations .....	9
Acknowledgements .....	9
Control Sheet.....	9

## About Healthwatch Northamptonshire

Healthwatch is the new independent consumer champion for health and social care from April 2013. There are 148 local Healthwatch across the country and a national body called Healthwatch England. Healthwatch Northamptonshire covers the county of Northamptonshire. Our funding comes from Northamptonshire County Council and we have established ourselves as a Community Interest Company (form of social enterprise) to ensure that we operate as an independent organisation and secure a firm financial basis. The Community Interest Company is a partnership between the University of Northampton and Northampton Volunteering Centre.

Our rights and responsibilities include:

- We have the power to monitor (known as “enter and view”) health and social care services (with one or two exceptions)
- We will be a strong and powerful voice for local people to influence how services are planned, organised and delivered
- We will be an effective voice rooted in the community. To be that voice, we will find out what local people think about health and social care. We will research patient, user and carer opinion using lots of different ways to find out views and experiences so that the community is effectively represented
- We will report our findings of local views and experiences to local health and social care decision makers and make the case for improved services
- We will provide information and advice about health and social care services
- Where we don’t feel our voices are being heard, we will escalate our concerns and report our evidence to national organisations including Healthwatch England and the Care Quality Commission (the independent regulator of health and social care).

## Enter & View

In order to enable Healthwatch Northamptonshire to gather the information it needs about services, there are times when it is appropriate for Healthwatch Volunteers to see and hear for themselves how those services are provided. That is why the Government has introduced duties on certain commissioners and providers of health and social care services (with some exceptions) to allow authorised Healthwatch representatives to enter premises that service providers own or control to observe the nature and quality of those services.

Healthwatch Enter and Views are not part of a formal inspection process, neither are they any form of audit. Rather, they are a way for Healthwatch Northamptonshire to gain a better understanding of local health and social care services by seeing them in operation. Healthwatch Enter and View Authorised Representatives are not required to have any prior in-depth knowledge about a service before they Enter and View it. Their role is simply to observe the service, talk to service users and staff if appropriate, and make comments and recommendations based on their subjective observations and impressions in the form of a report.

This Enter and View Report is aimed at outlining what they saw and making any suitable suggestions for improvement to the service concerned. The reports may also make recommendations for commissioners, regulators or for Healthwatch to explore particular issues in more detail. Unless stated otherwise, the visits are not designed to pursue the rectification of issues previously identified by other regulatory agencies. Any serious issues that are identified during a Healthwatch Enter and View visit are referred to the service provider and appropriate regulatory agencies for their rectification.

Legislation allows 'Enter and View' activity to be undertaken with regard to the following organisations or persons:

- NHS Trusts
- NHS Foundation Trusts
- Local Authorities
- a person providing primary medical services (e.g. GPs)
- a person providing primary dental services (i.e. dentists)
- a person providing primary ophthalmic services (i.e. opticians)
- a person providing pharmaceutical services (e.g. community pharmacists)
- a person who owns or controls premises where ophthalmic and pharmaceutical services are provided
- Bodies or institutions which are contracted by Local Authorities or the NHS to provide health or care services (e.g. adult social care homes and day-care centres).

## Key Benefits of Enter & View

To encourage, support, recommend and influence service improvement - by:

- Capturing and reflecting the views of service users who often go unheard, e.g. care home residents
- Offering service users an independent, trusted party (lay person) with whom they feel comfortable sharing experiences
- Engaging carers and relatives
- Identifying and sharing ‘best practice’, e.g. activities that work well
- Keeping ‘quality of life’ matters firmly on the agenda
- Encouraging providers to engage with local Healthwatch as a ‘critical friend’, outside of formal inspection
- Gathering evidence at the point of service delivery, to add to a wider understanding of how services are delivered to local people
- Supporting the local Healthwatch remit to help ensure that the views and feedback from service users and carers play an integral part in local commissioning
- Spreading-the-word about local Healthwatch.

## Details of the Visit

Name and address of premises visited	St Matthew’s Unit, 29/31 St Matthews Parade, Northampton, NN2 7HF
Name of service provider	St Matthew’s Healthcare
Type of Service	Mental Health
Specialisms	Accommodation for 58 persons from the age of 18 years who experience mental illness and have complex needs.
Registered Manager	Jasbinder Bhullar RMN BSc (Hons)
Date and time of visit	26 June 2014, 10.00am
Authorised representatives undertaking the visit	Moya McVicar and Diann Layram
Support Staff	Jo Spenceley, Healthwatch Officer
Contact details of Healthwatch Northamptonshire	Sunley Conference Centre, Boughton Green Road, Northampton, NN2 7AL 01604 892953 jospenceley@healthwatchnorthamptonshire.co.uk

## **Purpose of the visit**

Healthwatch Northamptonshire is carrying out a series of visits to Social Care funded accommodation in Northamptonshire to ascertain the quality of life and experience and opinions of residents. St Matthew's Unit was selected as one of two homes to visit to pilot a new methodology. This report relates only to this specific visit and feedback we have received directly to the office during the same time period. It is not representative of all service users, only those who contributed within the restricted time available, through interviews or other feedback.

## **How the visit was conducted**

The visit was an announced visit with the Manager being given 14 days' notice. We sent letters, posters and leaflets to the home to inform residents, relatives (or equivalent) and staff about our visit and Healthwatch Northamptonshire. We observed the condition of the premises, and interaction between the staff and residents and talked with a number of residents, one family member who was visiting at the time, and staff who were on duty at the time of the visit. We also spoke with the manager at the start of the visit and at the end to clarify any questions that had been raised.

Due to the complex needs and disabilities of the service users it was difficult to communicate with some but it was possible to gain the views of the service users with regard to the support they receive.

## **Observations and findings**

### **General impressions of the home**

First impressions were of a well maintained buildings and grounds with clear directions and information for visitors. The front door was opened promptly when we arrived, and staff greeted us in a pleasant and welcoming manner. The entrance was spacious and there was a desk with two staff. The general décor was good, the general atmosphere was welcoming and there were no unpleasant odours. Staff explained that admission is by pass key for main doors and some internal doors and that entry and exit of the building varied depending on the mental capacity and legal reasons for service users. Some service users had fobs that opened all doors and others were restricted to internal access only. The Manager spent some time explaining the structure of the organisation and the broad range of services for service users with mental health issues. He gave details of their quality assurance procedures, particularly their use of independent lay visitors from RESEC (Research in Specialist and Elderly Care), the dementia and

research charity based at the University of Oxford, who visit quarterly, and the staff training in place.

## **Personal care and dignity of resident**

There is a 1:3 ratio of staff to residents although this is sometimes 2:1 if the situation demands. At the time of the visit it was clear that the 1:3 level was being maintained. Service users were dressed appropriately for the weather and some were sitting out in a patio area outside the ground floor lounge. Staff were observed supporting service users in an appropriate manner and were involving them in conversation and encouraging some to go to the activity that was taking place at the time of the visit. Most service users have their own rooms but there are three double rooms available for those who prefer to share or when there may be couples admitted. We did not view any bedrooms. Residents appeared happy and when questioned seemed content.

A GP from a local practice visits weekly, arrangements exist with suitable dentists in the town and other services such as podiatry are available for those who need them.

## **Independence of residents and control over daily life**

Each service user has a care plan which is reviewed regularly - the philosophy of the unit is to rehabilitate service users back into independent living although this is not always successful and therefore some service users will require long term care and support.

There is a Day Centre attached to the unit and at the time of the visit a number of the service users were out of the service at various activities. One service user seen at the Day Centre was working towards returning to the community and when talking to a relative we heard of the success achieved during the stay at the unit. Another service user was looking after the guinea pigs as part of her therapy. There was also a garden project in place and generally it was obvious that effort was put into helping service users develop skills required to improve decision making and confidence building.

There are monthly community meetings with the service users to discuss any issues they may have and to plan social events etc.

## **Staff behaviour and attitudes and relationship between residents and staff**

As mentioned previously the staffing levels are 1:3, and in fact during the visit it was obvious that the ratio was more like 1:2, and for the trips out it was 1:1. The

staff spoken to were able to demonstrate their understanding of the service users' needs. Staff training takes place at regular intervals and one new staff member was able to share what training she had received during her induction. All staff were observed treating the service users in a respectful manner and engaging them in conversation. They were observant and responded to the needs of the service users promptly and discreetly. Agency staff are not used.

### **Activities for residents**

Every effort is made to help service users maintain their interests and hobbies. As described above one service user has two guinea pigs and is helped to manage their care, and has recently visited the vets as she was concerned for their health. Another had a shed where they made wooden objects to sell, like plant stands. Service users are encouraged to go out into the local community and some were out with staff either shopping or attending appointments.

Each service user's care plan details their interests and every effort is made to ensure that their interests and hobbies such as gardening, cinema, etc. are kept up. There are regular outings and BBQs.

There were several rooms being used, some with televisions, all comfortable, clean and well furnished. People could choose where to sit and what to do - if anything. One of the rooms had access to a patio area with chairs and tables, which gave sight of the main road and passing traffic.

There were lists of the weekly programme of events on the walls. Visits were made to the other units run by St Matthew's to have afternoon tea or a sing song etc. and this unit played host to other units for specific events.

### **Food and drink and meal times**

Menus cover all dietary needs, and there are choices available. At the time of the visit service users were having Bacon Butties that were being made as part of an activity being run by an occupational therapist. They could make their own or have one made for them. The smell of the cooking was stimulating appetites. Drinks are available at all times and there were no adverse comments about the food.

### **Relationship between the home and residents/relatives**

The service provided copies of newsletters produced for the relatives and service users. There are monthly meetings with the service users to discuss any issues they may have and to plan social events. One relative was full of praise for the support that their relative had received whilst at the Unit. The progress has been so good that a planned discharge was now in place. The staff were highly commended by



the relative and it was felt that the approach and encouragement given had brought about an improvement that had not been achieved elsewhere.

### **Staff satisfaction**

Regular staff meetings are held (monthly), and staff confirmed that they received regular training - one staff member confirmed that they had received all the relevant induction training.

All staff seen at the time of the visit were enthusiastic about the service and what was offered in terms of rehabilitation and ongoing assessment. The staff spoken to confirmed that they enjoyed working at St Matthew's and that there was a great deal of job satisfaction.

The Unit also offers placements for student nurses and uses every opportunity to provide staff with training and support to enable career development.

### **Recommendations**

Some of the internal areas are well used and require some day to day maintenance such as the Day Centre kitchen.

### **Acknowledgements**

Healthwatch Northamptonshire would like to thank Mr Jasbinder Bhuller and all the residents and staff of St Matthews Unit for their assistance in planning the visit and the preparation of this report as well as the provision of opinion and feedback.

### **Control Sheet**

Date Submitted	17 July 2014
Date Response due	14 August 2014
Date Response Received	10 September 2014
Follow up actions	